

**WITHDRAWAL**

JD-CV-41 Rev. 10-01

**STATE OF CONNECTICUT  
SUPERIOR COURT**  
*www.jud.state.ct.us*

DOCKET NO. \_\_\_\_\_

RETURN DATE \_\_\_\_\_

**COMPLETE ALL SECTIONS BELOW**

NAME OF CASE (FIRST-NAMED PLAINTIFF VS. FIRST-NAMED DEFENDANT) \_\_\_\_\_

☐ Judicial District    ☐ Housing Session    ☐ G.A. No. \_\_\_\_\_

ADDRESS OF COURT (No., street, town and zip code) \_\_\_\_\_

**SECTION I (check only one box) THIS WITHDRAWAL IS BEING FILED BECAUSE THE DISPUTE HAS BEEN RESOLVED BY:****I. COURT-ANNEXED ADR**

- 411088 ☐ Early Intervention  
411089 ☐ Early Neutral Evaluation  
411090 ☐ Attorney Trial Referee  
411091 ☐ Fact-Finding  
411093 ☐ Arbitration  
411094 ☐ Mediation  
411095 ☐ Special Masters  
411096 ☐ Summary Jury Trial

**II. COURT INTERVENTION**

- 411098 ☐ Pretrial Conference  
411099 ☐ Trial Management Conference  
411100 ☐ Commencement of Trial (court trial - first witness sworn;  
jury trial - trial jurors sworn)

**III. PRIVATE ADR**

- 411102 ☐ Provider Name: \_\_\_\_\_

**IV. OTHER**

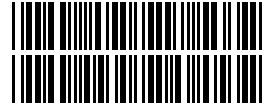
- 411103 ☐ Discussion of Parties on Their Own  
415602 ☐ Unilateral Action of Party(ies)

**SECTION II WITHDRAWAL**

(Do not check the following two boxes if any intervening complaints, cross complaints, counterclaims, or third party complaints remain pending in this case. See below for partial withdrawal of action.)

**DISPOSITIVE**

- (WDACT) ☐ The Plaintiff's action is WITHDRAWN AS TO ALL DEFENDANTS without costs to any party.  
(WOARD) ☐ A judgment has been rendered against Defendant(s):



and the Plaintiff's action is WITHDRAWN AS TO ALL REMAINING DEFENDANTS without costs.

**PARTIAL****The**

- (WDCOMP) ☐ Complaint  
(WDCOUNT) ☐ Counts of the complaint: \_\_\_\_\_  
(WDINTCO) ☐ Intervening Complaint  
(WDTHPC) ☐ Third Party Complaint  
(WAPPCOM) ☐ Apportionment Complaint  
(WDCC) ☐ Cross Complaint (cross claim)  
(WOC) ☐ Counterclaim  
(WOAAP) ☐ Plaintiff(s): \_\_\_\_\_  
(WOAAD) ☐ Complaint against defendant(s): \_\_\_\_\_ only w/o costs

☐ Other: \_\_\_\_\_

**in the above entitled action is withdrawn.****SIGNATURE REQUIRED**

Plaintiff \_\_\_\_\_ ; By \_\_\_\_\_ Attorney  
Plaintiff \_\_\_\_\_ ; By \_\_\_\_\_ Attorney  
Defendant \_\_\_\_\_ ; By \_\_\_\_\_ Attorney  
Defendant \_\_\_\_\_ ; By \_\_\_\_\_ Attorney

**NAME & ADDRESS  
OF SIGNER:** ➡ \_\_\_\_\_**SECTION III CERTIFICATION**

I hereby certify that a copy was mailed/delivered to all counsel and pro se parties of record on:	DATE	SIGNED (Individual attorney or pro se party) <b>X</b>	PHONE NO. (Area code first)
NAME OF EACH PARTY SERVED *		ADDRESS AT WHICH SERVICE WAS MADE*	

\* If necessary, attach additional sheet with names of each party served and the address at which service was made.